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CONFIRMATION NO. 8469

SERIAL NUMBER 10/825,391	FILING OR 371(c) DATE 04/14/2004 RULE	CLASS 424	GROUP ART UNIT 1645	ATTORNEY DOCKET NO. 12780/103
APPLICANTS Joan D. Leonard, Olathe, KS; Robert W. Tully, Olathe, KS;				
** CONTINUING DATA ***** This application is a DIV of 10/726,029 12/02/2003 * which is a DIV of 09/708,352 11/08/2000 which claims benefit of 60/164,286 11/08/1999 (*)Data provided by applicant is not consistent with PTO records.				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/10/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		STATE OR COUNTRY KS	SHEETS DRAWING 2	TOTAL CLAIMS 10
Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 2		
ADDRESS 26646				
TITLE VACCINES FOR MYCOPLASMA BOVIS AND METHODS OF USE				
FILING FEE RECEIVED 685	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	